

**TESTIMONY OF
PATRICK J. MONAHAN II
ON BEHALF OF THE
CONNECTICUT HOSPITAL ASSOCIATION
BEFORE THE
PUBLIC HEALTH COMMITTEE
Wednesday, March 14, 2007**

SB 1067, An Act Authorizing Civil Fines For Hospital Violations

The Connecticut Hospital Association (CHA) appreciates this opportunity to testify on **SB 1067, An Act Authorizing Civil Fines For Hospital Violations**. CHA opposes this bill because it runs counter to the consensus among patient safety and quality improvement experts that punitive measures do not improve the quality of care, and because it is unnecessary, as hospitals already pay fines for healthcare violations as part of the Department of Public Health (DPH) regulatory consent agreement process.

SB 1067 would permit the Commissioner to impose on hospitals a fine of up to \$10,000 per day for any violation of a statute or regulation. This monetary penalty would be in addition to the Commissioner's existing statutory powers to revoke, suspend, or censure a license, and to order compliance or place a hospital on probation.

This bill would undermine the significant work that Connecticut's hospitals, the DPH, and this General Assembly have done in recent years to improve and promote patient safety and quality in Connecticut. In this culture of increasing awareness about what improves patient care and what does not, national experts, including patient-oriented advocates such as the Institute of Medicine, the National Center for Patient Safety, and The Joint Commission, agree that a punitive focus on accountability is a stumbling block to improvement, and that non-punitive approaches that promote error prevention and collaborative analysis of system breakdowns facilitate true accountability and quality improvement.

Connecticut has been a leader when it comes to implementing quality improvement and patient safety initiatives. Public Act 04-164 (codified at sections 19a-127n and 19a-127o), which aligned our adverse event reporting statute with national standards and included one of the nation's first patient safety organization provisions, is a recent, significant example. That legislation was supported by patient advocates, providers and regulators alike, because it reflected Connecticut's interest in creating mechanisms that not only foster accountability, but also have a real prospect of promoting safety and quality. Connecticut hospitals also continue to be at the forefront of performance reporting, with results that consistently demonstrate our hospitals' commitment to excellence. SB 1067 would do nothing to advance these successes and accomplishments.

Furthermore, as a practical matter, the bill is not needed. Proponents of the bill have said that this bill is necessary because hospitals are not fined. This is not correct. Hospitals are fined. All one has to do is look to the DPH website, which shows the results of DPH's consent agreement process, in which hospitals pay substantial fines as part of the regulatory process. In the last three years, 11 of the state's acute care hospitals have paid fines as part of a consent decree, ranging from \$13,000 to \$250,000.

SB 1067 would be a big step backward. Connecticut does not need another example of the state's power to punish. This is especially so here, where the bill is absolutely unnecessary and would do nothing to assist the state or hospitals in improving the quality of healthcare for Connecticut's patients.

We urge you to reject this bill.

For additional information, contact CHA Government Relations at (203) 294-7310.